PAGE 1/8

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. **HUIZENGA FOR CONGRESS** PO Box 254 ADDRESS (number and street) (Check if address is changed) Zeeland 49464-1509 MI CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS billhuizenga@pdscompliance.com (Check if address is changed) Optional Second E-Mail Address admin@pdscompliance.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 04 2019 C00459297 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Nienhuis, David, , , Type or Print Name of Treasurer Nienhuis, David,,, [Electronically Filed] 02 10 2022 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only Local 202-694-1100

FEC Form 1 (Revised 02/2009)	 Page 2
TYPE OF COMMITTEE Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information by	pelow.)
(b) This committee is an authorized committee, and is NOT a principal campaign committee. information below.)	(Complete the candidate
Name of Candidate Huizenga, William P, , The Hon.,	
Candidate Party Affiliation REP Office Sought: House Senate President	State MI ent District O4
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee	ee.
Name of Candidate	
Party Committee: (National, State	(Democratic,
(d) This committee is a or subordinate) committee of the	Republican, etc.) Party.
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) I	ts connected organization is a:
Corporation Corporation w/o Capital Stock	Labor Organization
Membership Organization Trade Association	Cooperative
In addition, this committee is a Lobbyist/Registrant PAC.	
This committee supports/opposes more than one Federal candidate, and is NOT a separation committee. (i.e., nonconnected committee)	ate segregated fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fundraising Representative:	
(g) This committee collects contributions, pays fundraising expenses and disburses net proceeds committees/organizations, at least one of which is an authorized committee of a federal cand	•
(h) This committee collects contributions, pays fundraising expenses and disburses net proceeds committees/organizations, none of which is an authorized committee of a federal candidate.	for two or more political
Committees Participating in Joint Fundraiser	
The Rivalry Joint Committee 1. FEC ID number	C00589945
2.	
3.	
4.	

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Write or Type Committee Name	9	
HUIZENGA FO	R CONGRESS	
6. Name of Any Connected (Organization, Affiliated Committee, Joint Fundraising Representative, or	Leadership PAC Sponsor
FINANCIAL INNOVAT Mailing Address Relationship: Connected	228 S. WASHINGTON ST. STE. 115	22314 ZIP CODE Leadership PAC Sponsor
Custodian of Records: Idea books and records. Kilgore, Pa	ntify by name, address (phone number optional) and position of the pers	on in possession of committee
Full Name	824 S Milledge Ave Ste 101	
	Athens	30605
Title or Position	CITY STATE	ZIP CODE
Assistant Treasurer	706 Telephone number	534 7780
3. Treasurer: List the name an any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; ar assistant treasurer).	nd the name and address of
Full Name Nienhuis, I of Treasurer	David, , ,	
. J		
	Zeeland	49464-1737
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number 616	5 772 4615

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Full Name of Designated		
Agent		
Mailing Address	ss	
	CITY STATE	ZIP CODE
Title or Position		ZII GODE
	Telephone number	
safety deposit l	er Depositories: List all banks or other depositories in which the committee deposits fund boxes or maintains funds. Depository, etc.	
safety deposit l	boxes or maintains funds. Depository, etc. BB&T 1909 K St NW SS	20006
safety deposit I Name of Bank,	boxes or maintains funds. Depository, etc. BB&T 1909 K St NW	
safety deposit I Name of Bank,	boxes or maintains funds. Depository, etc. BB&T 1909 K St NW SS	
safety deposit I Name of Bank, Mailing Addres	boxes or maintains funds. Depository, etc. BB&T 1909 K St NW SS Washington DC 2	20006
safety deposit I Name of Bank, Mailing Addres	boxes or maintains funds. Depository, etc. BB&T 1909 K St NW Washington CITY STATE Huntington National	20006
safety deposit I Name of Bank, Mailing Addres	boxes or maintains funds. Depository, etc. BB&T 1909 K St NW SS CITY STATE CITY STATE 101 E. Main Avenue	20006
safety deposit I Name of Bank, Mailing Address	boxes or maintains funds. Depository, etc. BB&T	20006

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

polemental information g) or (h), 6, 8 and/or 9 Page $\frac{5}{}$ of $\frac{8}{}$

5(a)	or(h). Joint Fundraisin	α Participant:		
(9)	1.	<u> </u>	FEC ID number	C
	2.		FEC ID number	C
			FEC ID number	C
	3.		FEC ID number	C
	4.		T LO ID Humber	0
6.	Name of Any Connected Team Huizenga	Organization, Affiliated Committee, Joint Fundra	ising Representativ	re, or Leadership PAC Sponsor
	Mailing Address	PO BOX 2485		
		SPRINGFIELD	VA	22152
	Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Fundraising Represen	tative Leadership PAC Sponsor
8.	Designated Agent: Identify Full Name	y by name, address (phone number – optional)		
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Teld	ephone Number	
9.	Banks or Other Deposito safety deposit boxes or man Name of Bank, Depository, etc. Mailing Address		he committee deposi	its funds, holds accounts, rents
		CITY A	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page ___ **of** ___

(h). Joint Fundraisin		FEC ID number	C
1.		FEC ID number	
2.			C
3.		FEC ID number	C
4.		FEC ID number	C
lame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e. or Leadership PAC Spon
Bringing Great Re	_	g	-,
Mailing Address	824 S Milledge Ave Ste 101		
			1 1 1 1 1 1 1 1 1
	Athens	GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional)		
esignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional) CITY	STATE A	
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY Te ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail	y by name, address (phone number – optional) CITY CITY Te ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
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Full Name	ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

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5(g) or (h). Joint Fundraisin	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
_				
6. N		Organization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
	WESTERN MICH	IGAN VICTORY FUND		
		228 S. WASHINGTON STREET		
	Mailing Address			
		SUITE 115		
		ALEXANDRIA	L L VA	22314
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sponsor
_				
8. D	esignated Agent: Identify	by name, address (phone number – optional)		
8. D 0		by name, address (phone number – optional)		
8. D (Full Name	by name, address (phone number – optional)		
 3. D ∙	Full Name	by name, address (phone number – optional)		
	Full Name	CITY	STATE A	ZIP CODE A
— 8. D ⊕	Full Name	CITY A		
8. D	Full Name	CITY A	STATE A	
— 9. B i	Full Name	CITY A Tele Ties: List all banks or other depositories in which the	STATE ▲	ZIP CODE A
— 9. B 3	Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or ma	CITY CITY Tele ries: List all banks or other depositories in which the intains funds.	STATE ▲	ZIP CODE A
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——————————————————————————————————————	Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or material deposit boxes or material depository, etc.	CITY CITY Tele ries: List all banks or other depositories in which the intains funds. Ce Bank	STATE ▲	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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g Participant:		
	FEC ID number	С
<u> </u>	FEC ID number	C
	FEC ID number	С
	FEC ID number	С
Organization, Affiliated Committee, Joint F	undraising Representativ	e, or Leadership PAC Sponso
COMMITTEE THE		
228 S WASHINGTON ST STE 115		
1		
ALEXANDRIA	, VA ,	22314
CITY A	STATE A	ZIP CODE ▲
▼ CITY ▲	STATE ▲	ZIP CODE ▲
	Telephone Number	1_1 1_1
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ries: List all banks or other depositories in wintains funds.		ts funds, holds accounts, rents
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intains funds.		ts funds, holds accounts, rents
intains funds.		ts funds, holds accounts, rents
-	228 S WASHINGTON ST STE 115 ALEXANDRIA CITY Organization Affiliated Committee To by name, address (phone number – optional)	FEC ID number FE